

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>	<i>OB/PC/AD</i>	
O.I.P.E. CLASSIFIER		48	3/30/00
FORMALITY REVIEW	<i>TC</i>	- 20017	<i>SCBBD</i>
RESPONSE FORMALITY REVIEW			

7-12-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	Original
1	5/22/93
2	5/22/93
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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